WOMBLE CARLYLE

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OC1 2 v 2004

Atty Dkt A213 1010.1

IN THE U.S. PATENT AND TRADEMARK OFFICE

Application No.: 10/627,680	Confirmation No. 4613
Application of: G. ATANASOV	Group Art Unit: 2816
Filing Date: July 28, 2003	Examiner: Lepisto, Ryan A.
Title: Optical Monitoring of Thin-Film	Docket No. A213 1010.1
Deposition	Customer No. 26158

<u>AMENDMENT</u>

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir or Madam:

In response to the September 23, 2004 office, please enter and consider the following amendment and remarks.

Changes to the claims begin on page 2 of this paper. Remarks begin on page 9 of this paper.

10/28/2004 TYOUNG 00000001 090528

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162.00 DA

PATENT A	APPLICATION	FEE DETERMINATION	RECORD
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Effective January 1, 2003

Application or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Column 2)					_	SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS		2	9-8			1	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			2 8 minus 20≈		. 8			X\$ 9=¢	72.	OR	X\$18=	
IND	EPENDENT CL	AIMS	7 min	minus 3 = * Q		2		X42=	70		X84=	
MULTIPLE DEPENDENT CLAIM PRESENT										OR		
* If the difference in column 1 is less than zero, enter "0" in column 2							+140=	(1) ()	OR	+280=		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							TOTAL SMALL	ENTITY	OR	OTHER SMALL		
DMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	· HH	Minus	** 2	8	= 16		X\$ 9= ,	1440	OR	X\$18=	
AMEN	Independent	* 5	Minus	*** <u></u>		= 3	4	X42=	860	OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDENI	CLAIM			+140=		OR	+280=	
							1	TOTAL	·		TOTAL ADDIT. FEE	
		(Column 1)		(Colur	mn 2)	(Column 3)		ADDIT. FEE			AUDII. PEEI	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	. 62	Minus	** 4	4	= 18		X\$ 9=	620	OR	X\$18=	
AME	Independent	* 5	Minus	***	5	=	┦╏	X42=		OR	X84=	
<u> </u>	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	CLAIM		4	+140=		OR	+280=	
			-		•		l	TOTAL ADDIT. FEE	1620	RE	TOTAL ADDIT. FEE	
		(Column 1)		(Colur	mn 2)	(Column 3		~DDH. F CL 1			ADDII. I GE	
ENTC		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9≈		OR	X\$18=	
AMENDMENT	Independent	*	Minus	AAA		-	11	X42=		OR	X84=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	CLAIM		J	+140=			+280=	
	•	mn 1 is less than t	•	-			l	TOTAL		OR OR	TOTAL	
44	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEEOH ADDIT. FEEADDIT. FEEADIT. FEEADDIT. FEEADDIT. FEEADDIT. FEE									L		